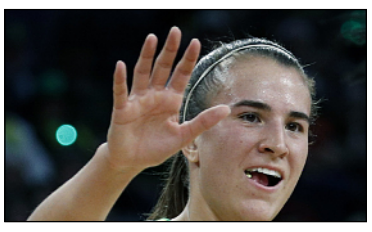
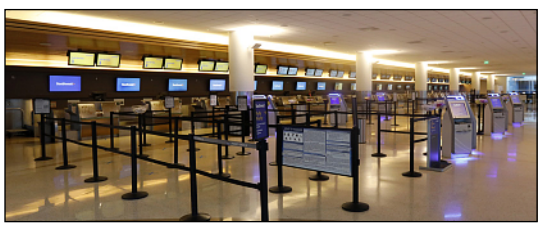
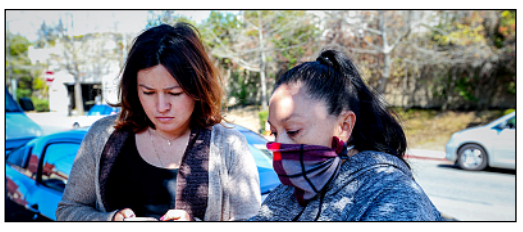
Sports: Basketball star's year of disappointment. C1



Business: Bay Area airports to get nearly $400M federal stimulus. C7



Local: Some tenants feel burden of massive debt to landlords. B1



Nation: Former president Obama endorses Biden. A4

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'THIS CAN'T BE A PERMANENT STATE'

Newsom drafts plan for gradual reopening

Six criteria, no timeline; stay-at-home order will be modified to be less restrictive

RICH PEDRONCELLI — THE ASSOCIATED PRESS

California Gov. Gavin Newsom discusses an outline for what it will take to lift coronavirus restrictions during a news conference at the Governor's Office of Emergency Services in Rancho Cordova on Tuesday.

By Marisa Kendall, John Woolfolk and Kerry Crowley
Staff writers

Half-full restaurants and classrooms. Servers delivering your meal wearing masks and gloves. Temperature checks when you walk into a business.

And forget about attending any large gatherings this summer.

That's the picture Gov. Gavin Newsom painted Tuesday — giving stir-crazy Californians hope that they may be free to leave their houses relatively soon, while also reminding them that life won't be completely normal for the foreseeable future as long as the coronavirus is still around.

"This can't be a permanent state, and I want you to know it's not. It will not be a permanent state,"

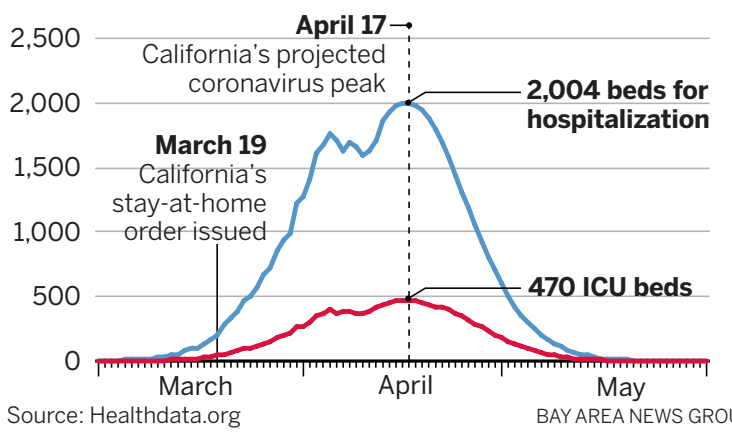
PLAN » PAGE 5

INSIDE

Wells Fargo among banks severely hurt by coronavirus; Amazon fires 3 more employees who criticized working conditions. **C7**

HAS CALIFORNIA REACHED THE PEAK?

The Institute for Health Metrics and Evaluation predicts that the state will hit its peak Friday for hospitalizations in its battle with the coronavirus pandemic. Here are the average number of hospital beds needed for new COVID-19 patients.



Source: Healthdata.org

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EASING VIRUS RULES

More like 'dimmer' than 'light switch'

When will life return to something like normal?

By John Woolfolk
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Gov. Gavin Newsom announced six "indicators" Tuesday for easing his nearly month-old stay-home order that has shut down schools and all but essential jobs and businesses throughout California, sending 1 in 9 workers in the state to the unemployment line.

Here's a look at what that will mean for returning to something like the normal lives we had before, or at least getting outside and back to work and school.

Q When will we get a clearer answer on how long this lockdown will last?

A If the trend line of new infections, hospitalizations and intensive care needs continues to flatten over the next two weeks, Newsom said he may be able to offer more clarity on that then. But don't expect the restrictions to change anytime soon. He expects the state to provide general guidance, but to defer to local county health officials. In the Bay Area, those officials acted together in ordering a "shelter in place" three days before the statewide stay-home order. And Santa Clara County Health Officer Dr. Sara Cody, who led that effort, warned Tuesday that residents should be prepared for a "marathon, perhaps an ultra marathon."

INSIDE

Sports fans, don't get your hopes up about seeing events, games, just yet. **C1**

Q Will the lockdown lift at once, just as it was imposed?

A Unlikely. Newsom said Tuesday that six indicators would lead to modifying rather than removing the order, and that he won't stop local health officers from maintaining stricter measures as they see fit. Newsom said modifications would come more like "a dimmer" rather than "a light switch," and Cody said, "I don't think anybody's thinking about an 'on' or 'off.' "

OPEN » PAGE 5

HEALTH WORKERS 'VERY ANXIOUS'

Hospital staff outbreak underscores the risks

Facilities using creative safety measures to stop spread of coronavirus

By Emily DeRuy
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Bay Area health care workers are expressing frustration and alarm after a deadly coronavirus outbreak at Santa Clara Valley Medical Center raised a fundamental question: Can hospitals keep doctors and nurses on the front lines from spreading the disease among themselves?

Some hospitals are adopting novel approaches to treating patients sickened by the highly contagious disease, like video chats instead of in-room visits. But the challenges of performing round-the-clock care during a pandemic, often with limited medical supplies and protective gear, are clearly mounting.

Valley Medical said it had strict procedures and cleaning processes in place, from screening everyone entering the hospital for fever and requiring employees with symptoms to stay home to mandating that everyone wear surgical masks and practice good hygiene.

But six employees with ties to a single unit at the county-run hospital in San Jose became ill last month, with four testing positive for COVID-19, one assumed to be positive and one believed to have died as a result of the virus.

"Health care workers across the board are very anxious about

SPREAD » PAGE 6

INSIDE

Trump orders halt to funding for the World Health Organization. **A3**

ADVANCE DIRECTIVES

Are your end-of-life wishes known?

Experts: Make things easier on yourself, your family and your doctor

By Martha Ross
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One of the haunting realities of the COVID-19 pandemic is that people are suffering and dying alone in intensive care units. They might need ventilators or other machines to keep them alive, and they have no loved ones holding their hands, offering love and support and helping to convey their wishes to doctors.

Unfortunately, as a 2017 Kaiser Family Foundation/The Economist survey found, most people have not set down their wishes for such scenarios in documents known as advance directives. And this is adding to the uncertainty in emergency rooms overwhelmed by COVID-19 patients, say experts in geriatrics and palliative care.

JANE TYSKA — STAFF PHOTOGRAPHER

Dr. Nazia Sheriff wears personal protective equipment outside of her clinic in Orinda on Monday.

Front-line providers are "desperate" for any information so they make sure patients' care aligns with what they would want, said Rebecca Sudore, a geriatrician and professor of medicine at UC San Francisco.

"Any advanced care planning done now, even just naming a medical decision-maker, can

ADVANCE » PAGE 6

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INDEX

Business C7
Legals B7
Comics/TV B8
Lottery A2
Local B1
Obituaries B5
Puzzles B2, C4, C5
Weather B10

WEATHER
H: 74-79 **L:** 49-53
Full report on **B10**

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